

HCPCS Codes for Community Alternative to Psychiatric Residential Treatment Facility (CA-PRTF) Demonstration Grant

CA-PRTF Service	HCPCS Code	Modifier	HCPCS Code Description	Unit/Rate
Habilitation	H2014	U7	Skills training & development, per 15 minutes	\$21.40/unit. 1 unit= 15 minutes
Respite Routine Hourly	T1005	U7	Respite care services, up to 15 minutes	\$4.00 per unit 1 unit = 15 min Billed for less than 7 hrs per day
Respite Routine Daily	S5151	U7	Unskilled respite care, not hospice; per diem	\$100.00 per unit 1 unit = day (To be billed for 7 – 24 hrs per day) Not to exceed 14 consecutive days at any one time
Respite Crisis Daily	S5151	U7 U2	Unskilled respite care, not hospice; per diem	\$120.00 per unit 1 unit = day (Can bill when provided 8 -24 hrs/day) Not to exceed 14 consecutive days at any one time
Respite Daily in Medicaid Certified PRTF	S5151	U7 U3	Unskilled respite care, not hospice; per diem	\$321.52 per unit 1 unit = day (Can bill when provided 8-24 hrs/day) Not to exceed 14 consecutive days at any one time
Wraparound Facilitation	H2021	U7 U1	Community Based wrap around services, per 15 minutes U1 = Facilitator	\$28.75 per unit 1 unit = 15 min
Wraparound Technician	H2021	U7 U2	Community Based wrap around service, per 15 minutes, Technical Component U2 = Technician	\$26.14 per unit 1 unit = 15 min

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Consultative Clinical Therapeutic Services	H2019	U7 U3 U3 = Clinical psychologist or HSPP	Therapeutic behavioral services, per 15 minutes	\$22.50 per unit 1 unit = 15 min
Consultative Clinical Therapeutic Services	H2019	U7 U4 U4 = Mid level practitioner	Therapeutic behavioral services, per 15 minutes	\$17.50 per unit 1 unit = 15 min
Flex Funds	T2025	U7 U2 U2 = Misc non-reoccurring expenses	Waiver services, NOS	\$2000.00 per unit Limited to \$2000.00 per year per member
Non Medical Transportation	T2003	U7 U1 U1 = round trip	Non emergency transportation; encounter/trip	\$10.00 per unit 1 unit = round trip no daily limits on number of trips Limited to \$2000.00 per year per member
Training & Support for Unpaid Caregiver	H2015	U7 U1 U1 = Individual training sessions	Comprehensive community support services, per 15 minutes	\$15.00 per unit 1 unit = 15 min allow max 8 units per day Total of this service limited to \$2000.00 per year per member (all 3 codes)
Training & Support for Unpaid Caregiver	S5111	U7	Home care training for Family (caregiver)	\$2,000 max per unit 1 unit = registration, fees & supplies Total of this service limited to \$2000.00 per year per member (all 3 codes)
Training & Support for Unpaid Caregiver	S5116	U7	Home care training for Non-family (caregiver)	\$2,000 max per unit 1 unit = registration, fees & supplies Total of this service limited to \$2000.00 per year per member (all 3 codes)